

PATENT
Serial No. 10/020,015
Attorney Docket No. 450117-03595

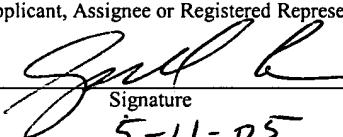


IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s) : Francois PACHET
Serial No. : 10/020,015
Filed : December 14, 2001
Title of Invention : INFORMATION SEQUENCE EXTRACTION AND
BUILDING APPARATUS e.g. FOR PRODUCING
PERSONALIZED MUSIC TITLE SEQUENCES
Examiner : Etienne Pierre Leroux
Art Unit : 2171

745 Fifth Avenue
New York, NY 10151

I hereby certify that this correspondence is being deposited with
the United States Postal Service as first class mail in an envelope
addressed to: Mail Stop AF, Commissioner for Patents, P.O.
Box 1450, Alexandria, VA 22313-1450, on May 11, 2005.

Samuel S. Lee, Reg. No. 42,791
(Name of Applicant, Assignee or Registered Representative)

Signature
5-11-05
Date of Signature

AMENDMENT UNDER RULE 116

Mail Stop AF
Commissioner for Patent
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Final Office Action of March 1, 2005, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims, which begins on page 2.

Remarks/Arguments begin on page 19.



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745 Fifth Avenue
New York, NY 10151
Tel: 212-588-0800

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

No additional fee is required.
 The fee has been calculated as shown below.
 This is an application of a small entity under 37 CFR 1.9(f), and the amounts shown in parentheses apply.

Claims as Amended

(1)	(2) Claims remaining after amendment	(3)	(4) Highest number previously paid for	(5) Present extra	(6) Rate	(7) Additional Fee
Total claims	59	Minus	** = 59	* 2 x	\$50 (25)	= \$00.00
Independent claims	5	Minus	*** = 4	* 1 x	\$200 (43)	= \$200.00
Total additional fee for this amendment						\$200.00

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the highest number of total claims previously paid for is less than 20, write "20" in this space.

*** If the highest number of independent claims previously paid for is less than 3, write "3" in this space.

This application contains a multiple dependent claim. The required fee of \$280(140) has been previously paid or is paid herewith .

This response is being filed within the ___ month following the expiration of the term originally set therefor. This is a petition to request a ___ month extension of time. A check covering the cost of the petition is enclosed.

Check in the amounts of \$200.00 are attached, which cover the cost of additional independent claim and ___ petition for extension of time.

Charge \$____ to Deposit Account No. 50-0320.

Please charge any additional fees incurred by reason of this response or credit any overpayment to Deposit Account No. 50-0320.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on September 9, 2004.

Samuel S. Lee, Reg. No. 42,791

Name of Applicant, Assignee or Registered Representative

Samuel S. Lee
Signature

May 11, 2005

Date of Signature

Respectfully submitted,

FROMMER LAWRENCE & HAUG LLP
Attorneys for Applicant(s)

By:

Samuel S. Lee
Reg. No. 42,791